

# EXHIBIT C

No add. ff.

New York State Surrogate's Court  
New York State Bar Association Official OCA FormsForm I-1  
Inventory of AssetsSURROGATE'S COURT OF THE STATE OF NEW YORK  
COUNTY OF ONONDAGAIN THE MATTER OF THE ESTATE OF  
**WALLACE WOOD**  
a/k/a  
**WALLACE ALLAN WOOD; WALLY WOOD**

Deceased.

**LIST OF ASSETS — INVENTORY**  
(Rule § 207.20(a))\*File No. 2011-1546 / A

The undersigned, a fiduciary or an attorney for the above estate, certifies that the following recapitulation constitutes the gross estate (for tax purposes) of the above decedent. The following documents are attached:

- ☒ a detailed list of assets; OR
- ☐ a copy of one of the following:
- ☐ Form ET-706
  - ☐ Form TT-385
  - ☐ Form 706
  - ☐ Form 706NA

RECEIVED  
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CLERK'S OFFICE  
SURROGATE'S COURT  
ONONDAGA COUNTY, N.Y.

IF FORM ET-706 IS ATTACHED, ALL RIGHTS TO SECRECY UNDER TAX LAW § 994 ARE WAIVED.

Date of Death <b>November 2, 1981</b>	Date of Letters <b>January 18, 2012</b>
Type of Letters <b>Letters Testamentary</b>	

**Fiduciary:**

Name <b>John H. Robinson</b>
Address (if changed)
Name
Address (if changed)
Name
Address (if changed)
Name
Address (if changed)
Name
Address (if changed)

RECAPITULATION OF ATTACHED SCHEDULES	Non-probate, Joint or Trust Property	Individually Owned by Decedent or Payable to Estate
A. Real Estate	\$	\$ 0.00
B. Stocks and Bonds		0.00
C. Mortgages, Notes, Cash, etc.		0.00
D. Insurance on Decedent's Life	0.00	0.00
E. Jointly Owned Property	0.00	
F. Miscellaneous & Trust Property	0.00	20,000.00
G. Transfers During Decedent's Life	0.00	0.00
H. Powers of Appointment	0.00	0.00
I. Annuities	0.00	0.00
<b>TOTALS</b>	<b>\$ 0.00</b>	<b>\$ 20,000.00</b>

Cause of Action Pending for Wrongful Death or Conscious Pain and Suffering:	Amount Claimed	\$ 0.00
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Filing Fee under § 2402(7) \$ 215.00

Filing Fee Initially Paid \$ 215.00

☒ Balance ☐ Refund Due \$ 0.00

Certified to be true on: 3/27/15

Signature

John H. Robinson  
Print Name

Gay M. Pomeroy, Esq.

Print Name of Attorney

(315) 233-8223

Telephone

Mackenzie Hughes LLP

Firm

101 South Salina Street, Suite 600, P.O. Box 4967, Syracuse, New York 13221-4967

Address

**GROSS ASSETS****Schedule A: Real Estate (Individually Owned Property)**

Item	Description	Value at Date of Death
1	NONE	0.00
<b>TOTAL SCHEDULE A</b>		<b>\$0.00</b>

**Schedule B: Stocks and Bonds (Individually Owned)**

Item	Description, including face amount of bonds & number of shares	Value at Date of Death
1	NONE	0.00
<b>TOTAL SCHEDULE B</b>		<b>\$0.00</b>

**Schedule C: Mortgages, Notes and Cash (Including Bank Deposits)**  
 (Jointly owned property should be reported at E; trust property at F)

Item	Description	Value at Date of Death
1	NONE	0.00
<b>TOTAL SCHEDULE C</b>		<b>\$0.00</b>

**Schedule D: Insurance on Decedent's Life****(1) Payable to Estate**

Item	Description	Value at Date of Death
1	NONE	0.00
<b>TOTAL PAYABLE TO ESTATE</b>		<b>\$0.00</b>

**(2) Payable to Named Beneficiary**

Item	Description	Value at Date of Death
1	NONE	0.00
<b>TOTAL PAYABLE TO NAMED BENEFICIARY</b>		<b>\$0.00</b>

## Schedule E: Jointly Owned Property (Real &amp; Personal Property)

## (1) Real Estate

Item	Description	Joint Tenant	Value at Date of Death
1	NONE	NONE	0.00
<b>TOTAL REAL ESTATE</b>			<b>\$0.00</b>

## (2) Stocks and Bonds

Item	Description	Joint Tenant	Value at Date of Death
1	NONE	NONE	0.00
<b>TOTAL STOCKS AND BONDS</b>			<b>\$0.00</b>

## (3) Mortgages, Notes and Cash

Item	Description	Joint Tenant	Value at date of Death
1	NONE	NONE	0.00
<b>TOTAL MORTGAGES, NOTES AND CASH</b>			<b>\$0.00</b>

## (4) Miscellaneous Goods and Furnishings

Item	Description	Joint Tenant	Value at date of Death
1	NONE	NONE	0.00
<b>TOTAL MISCELLANEOUS GOODS AND FURNISHINGS</b>			<b>\$0.00</b>

<b>TOTAL SCHEDULE E</b>	<b>\$0.00</b>

**Schedule F: Other Miscellaneous Property**

<b>(1) Individually Owned</b>		
<b>Item</b>	<b>Description</b>	<b>Value at Date of Death</b>
<b>1</b>	<b>Documents including original sketches, designs and text documents, and inking pen; and miscellaneous tangible items</b>	<b>20,000.00</b>
<b>TOTAL INDIVIDUALLY OWNED PROPERTY</b>		<b>\$20,000.00</b>

**(2) Assets Passing to the Estate from Employment**

<b>Item</b>	<b>Description</b>	<b>Value at Date of Death</b>
<b>1</b>	<b>NONE</b>	<b>0.00</b>
<b>TOTAL ASSETS PASSING TO THE ESTATE FROM EMPLOYMENT</b>		<b>\$0.00</b>

**(3) Trust Property**

<b>Item</b>	<b>Description</b>	<b>Value at Date of Death</b>
<b>1</b>	<b>NONE</b>	<b>0.00</b>
<b>TOTAL TRUST PROPERTY</b>		<b>\$0.00</b>

**Schedule G: Transfers During Decedent's Life**

<b>Item</b>	<b>Description</b>	<b>Value at Date of Death</b>
<b>1</b>	<b>NONE</b>	<b>0.00</b>
<b>TOTAL TRANSFERS DURING DECEDENT'S LIFE</b>		<b>\$0.00</b>

**Schedule H: Powers of Appointment**

Item	Description	Value at Date of Death
1	NONE	0.00
<b>TOTAL NON-PROBATE, JOINT OR TRUST</b>		<b>\$0.00</b>
<b>TOTAL INDIVIDUALLY OWNED BY DECEDENT OR PAYABLE TO ESTATE</b>		<b>\$0.00</b>

**Schedule I: Annuities**

Item	Description	Value at Date of Death
1	NONE	0.00
<b>TOTAL NON-PROBATE, JOINT OR TRUST</b>		<b>\$0.00</b>
<b>TOTAL INDIVIDUALLY OWNED BY DECEDENT OR PAYABLE TO ESTATE</b>		<b>\$0.00</b>

**Cause of Action**  
 (for Decedent's wrongful death and for conscious pain and suffering,  
 as well as any other type of action)

Description	Court in Which Action Pending	Index Number	Demanded
1. NONE	NONE	NONE	0.00
<b>TOTAL AMOUNT CLAIMED</b>			<b>\$0.00</b>